REQUEST FOR

CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/695,775
Eiling Date	40/04/0000
Filing Date	10/24/2000
First Named Inventor	DAY -4 -1
FIRST Named inventor	RAY et al.
Art Unit	2651
Examiner Name	Davidson, Dan
Attorney Docket Number	Q00-1042-US1

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8,1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO).

1.	Submission required under 37 CFR 1.114
а	a. Previously submitted
	i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on(Any unentered amendment(s) referred to above will be entered).
	ii. Consider the arguments in the Appeal Brief or Reply Brief previously filed on
	iii.
⊃ b	p. X Enclosed
	i. X Amendment/Reply to Office Action of June 13, 2005 iii. Information Disclosure Statement (IDS)
	ii. Affidavit(s)/Declaration(s) iv. x Other Request for Three-Month Extension of Time
_	Miscellaneous a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
b	D. Other
3.	Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
а	a. X Payment by credit card (Form PTO-2038 enclosed)
	i. X RCE fee required under 37 CFR 1.17(e)
	ii. X Extension of time fee (37 CFR 1.136 and 1.17)
<u>.</u> .	iii. Other
b	c. Check in the amount of \$enclosed
С	The Director is hereby authorized to charge any deficiencies in payment of fees to Deposit Account 50-2198.
	WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Registration No. (Attorney/Agent) Name (Print /Type) Tejpal S. Hansra Signature December 13, 2005

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print/Type) Tejpal S. Hansra

Signature Tippel & An

Dec. 13, 2005